67.1

FEDERAL AVIATION REGULATION PART 67

MEDICAL STANDARDS AND CERTIFICATION

AUTHORITY: ## 67.1 to 7.31 issued under secs. 313(a), 314, 601, and 607 of the Federal Aviation Act of 1958; 49 U.S.C. 1354(a), 1355, 1421, and 1427.

SUBPART A GBNERAL

67.1 APPLICABILITY.

This subpart prescribes the medical standards for issuing medical certificates for airmen.

67.11 ISSUE.

An applicant who meets the medical standards prescribed in this part, based on medical examination and evaluation of his history and condition is estitled to an appropriate medical certificate.

67.13 FIRST-CLASS MEDICAL CERTIFICATE.

(a) To be eligible for a first-class medical certificate, an applicant must meet the requirements of paragraphs (b) through (f) tion.

(b) Eye;

- (1) Distant visual acuity of 20/20 or better in each eye separacety, without correction; or of at least 20/50 in sech eye separately corrected to 20/20 or better with corrective glasses, in which case the applicant may be qualified only on the condition that he wears those glasses while exercising the privileges of his airman certificate.
- (2) Near vision of at least v=1.00 at 18 inches with each eye separately, with or without corrective glasses.
- (3) Normal color vision.
- (4) Normal fields of vision.
- (5) No acute or chronic pathological condition of either eye or adenexae that might interfere with its proper function, might progress to that degree, or might be aggravated by flying.
- (6) Bifoveal fixation and vergencephoria relationship sufficient to prevent a break in fusion under conditions that may reasonably occur in performing airman duties.

Tests for the factors named in subparagraph (6) of this paragraph are not required except for applicants found to have more than one prism diopter of hyperphoria, six prism diopters of esophoria, or six prism diopters of exphoria. If these values are exceeded, the Civil Air Surgeon - D-105 -RULES SERVICE CO. COPYRIGHT, 1962 WASHINGTON, D.C.

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may require the applicant to be examined by a qualified eye specialist to determine if there is bifoveal fixation and adequate vergencephoria relationship. However, if the applicant is otherwise qualified, he is entitled to a medical certificate pending the results of the examination.

- (c) Bar, nose, throat, and aquilibrium:
 - (1) Ability to -
 - (i) Hear the whispered voice at a distance of at least 20 feet with each ear separately; or
 - (ii) Demonstrate a hearing acuity of at least 50 percent of normal in each ear throughout the effective speech and radio range as shown by a standard audiometer.
 - (2) No acute or chronic disease of the middle or internal ear.
 - (3) No disease of the mastoid,
 - (4) No unhealed (unclosed) perforation of the eardrum.
 - (5) No disease or malformation of the nose or throat that might interfere with, or be aggrevated by, flying.
 - (6) No disturbance in equilibrium.
- (d) Nervous system:
 - (i) No established medical history or clinical diagnosis of any of the following:
 - A character or behavior disorder that is severe enough to have repeatedly manifested itself by overt acts.
 - (ii) A psychotic disorder.
 - (iii) Chronic alcoholism.
 - (iv) Drug addiction.
 - (v) Bpilepsy.
 - (vi) A disturbance of consciousness without satisfactory medical explanation of the cause.
 - (2) No other disease of the nervous system, mental abnormality, or psychoneurotic disorder that the Civil Air Surgeon finds
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; or
 - (ii) May reasonably be expected, within two years after the finding to make him unable to perform those duties or exercise those privileges;

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and the findings are based on the case history and appropriate, qualified, medical judgment relating to the condition involved.

- (e) Cardiovascular:
 - (I) No established medical history or clinical diagnosis of -
 - (i) Myocardial infarction; or
 - (ii) Angina pectoris or other evidence of coronary heart disease that the Civil Air Surgeon finds may reasonably be expected to lead to myocardial infarction.
 - (2) If the applicant has passed his thirty-fifth birthday but not his fortieth, he must, on the first examination after his thirty-fifth birthday, show an absence of myocardial infarction on electrocardiographic examination.
 - (3) If the applicant has passed his fortieth hirthday, he must asnually show an absence of myocardial infarction on electrocardiographic examination.
 - (4) Unless the adjusted maximum readings apply, the applicant's reclining blood pressure may not be more than the maximum reading for his age group in the following table:

Age group	Maximum readings (reclining blood pressure in mm)		Adjusted maximum readings (reclining blood pressure in mm)	
	Systolic	Diastolic	Systolic	Diastolic
20 - 29 30 - 39 40 - 49 50 and over	140 145 155 160	88 92 96 98	155 165 170	98 100 100

For an applicant at least 30 years of age whose reclining blood pressure is more than the maximum reading for his age group and whose cardiac and hidney conditions, after complete cardiovascular examination, are found to be normal.

(5) If the applicant is at least 40 years of age, he must show a degree of circulatory efficiency that is compatible with the safe operation of aircraft at high altitudes.

An electrocardiogram, made according to acceptable standards and techniques within the 90 days before an examination for a first-class certificate, is accepted at the time of the physical examination as meeting the requirements of subparagraphs (2) and (3) of this paragraph.

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- (f) General medical condition:
 - (1) No established medical history or clinical diagnosis of diabetes mellitus that requires insulin or any other hypoglycemic drug for control.
 - (2) No other organic, functional, or structural disease, defect, or limitation that the Civil Air Surgeon finds -
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; or
 - (ii) May reasonably be expected, within two years after the finding, to make him unable to perform those duties or exercise those privileges;

and the findings are based on the case history and appropriate, qualified medical judgment relating to the condition involved.

67.15 SECOND-CLASS MEDICAL CERTIFICATE.

(a) To be eligible for a second-class medical cartificate, an applicant must meet the requirements of paragraphs (b) through (f) of this section.

(b) Rye:

- (1) Distant visual acuity of 20/20 or better in each eye separately, without correction; or of at least 20/50 in each eye separately corrected to 20/20 or better with corrective glasses, in which case the applicant may be qualified only on the condition that he wears those glasses while exercising the privileges of his airman certificate.
- (2) Enough accommodation to pass a test prescribed by the Administrator based primarily on ability to read official aeronautical maps.
- (3) Normal fields of vision.
- (4) No pathology of the eye.
- (5) Ability to distinguish aviation signal red, aviation signal green, and white.
- (6) Bifoveal fixation and vergencephoria relationship sufficient to prevent a break in fusion under conditions that may reasonably occur in performing airman duties.

Tests for the factors named in subparagraph (6) of this paragraph are not required except for applicants found to have more than one prism diopter of hyperphoria, six prism diopters of esophoria, or six prism diopters of exophoria. If these values are exceeded, the Civil Air Surgeon may require the applicant to be examined by a qualified eye specialist to determine if there is bifoveal fixation and adequate vergence—D-1

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phoria relationship. However, if the applicant is otherwise qualified, he is entitled to a medical certificate pending the results of the examination.

- (c) Ear, nose, throat, and equilibrium:
 - (1) Ability to hear the whispered voice at 8 feet with each ear separately.
 - (2) No acute or chronic disease of the middle or internal ear.
 - (3) No disease of the mastoid.
 - (4) No unhealed (unclosed) perforation of the eardrum.
 - (5) No disease or malformation of the nose or throat that might interfere with, or be aggravated by, flying.
 - (6) No disturbance in equilibrium.
- (d) Nervous system:
 - (1) No established medical history or clinical diagnosis of any of the following:
 - (i) A character or behavior disorder that is severe enough to have repeatedly manifested itself by overt acts.
 - (ii) A psychotic disorder.
 - (iii) Chronic alcoholism.
 - (iv) Drug addiction.
 - (v) Epilepsy.
 - (vi) A disturbance of consciousness without satisfactory medical explanation of the cause.
 - (2) No other disease of the nervous system, mental abnormality, or psychoneurotic disorder that the Civil Air Surgeon finds —
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; or
 - (ii) May reasonably be expected, within 2 years after the finding, to make him unable to perform those duties or exercise those privileges;

and the findings are based on the case history and appropriate, qualified, medical judgment relating to the condition involved.

(e) Cardiovascular:

No established medical history or clinical diagnosis of -

(1) Myocardial infarction; or

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- (2) Angins pectoris or other evidence of coronary heart disease that the Civil Air Surgeon finds may reasonably be expected to lead to myocardial infarction.
- (f) General medical condition:
 - (1) No established medical history or clinical diagnosis of diabetes mellitus that requires insulin or any other hypeglycemic drug for centrol.
 - (2) No other organic, functional, or structural disease, defect, or limitation that the Civil Air Surgeon finds
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; ax
 - (ii) May reasonably be expected, within two years after the finding to make him unable to perform those duties or exercise those privileges;

and the findings are based on the case history and appropriate, qualified, medical judgment relating to the condition involved.

67.17 THIRD-CLASS MEDICAL CERTIFICATE.

(a) To be eligible for a third-class medical certificate, an applicant must meet the requirements of paragraphs (b) through (f) of this section.

(b) Bye:

- (1) Distant visual acuity of 20/50 or better in each eye separately, without correction; or if the vision in either or both eyes is poorer than 20/50 and is corrected to 20/30 or better in each eye with corrective glasses, the applicant may be qualified on the condition that he wears these glasses while exercising the privileges of his airman certificate.
- (2) No serious pathology of the eye.
- (3) Ability to distinguish aviation signal red, aviation signal green, and white.
- (c) Bars, nose, throat, and equilibrium:
 - (1) Ability to hear the whispered voice at 3 feet.
 - (2) No acute or chronic disease of the internal ear.
 - (3) No disease or malformation of the nose or throat that might interfere with, or be aggravated by, flying.
 - (4) No disturbance in equilibrium.

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(d) Narvous system;

- (1) No established medical history or clinical diagnosis of any of the following -
 - (i) A character or behavior disorder that is apvere enough to have repeatedly manifested itself by overt acts.
 - (ii) A paychotic disorder.
- (Mi) Chronic alcoholism.
 - (ly) Drug addiction.
- o (v) Epilepsy.
 - (vi) A disturbance of consciousness without satisfactory medical explanation of the cause.
- (2) No other disease of the nervous system, mental abnormality, or psychoneurotic disorder that the Civil Air Surgeon finds
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; qr.
 - (ii) May reasonably be expected, within two years after the finding, to make him unable to perform those duties or exercise those privileges;

and the findings are based on the case history and appropriate, qualified, medical judgment relating to the condition involved.

(e) Cardiovascular:

- (1) No established medical history or clinical diagnosis of -
 - (i) Myocardial infarction; or
 - (ii) Augina pectorie or other evidence of coronary heart dissease that the Civil Air Surgeon finds may reasonably be expected to lead to myocardial infarction.

(f) General medical condition:

- No established medical history or clinical diagnosis of diaberes melitus that requires insulin or any other hypoglycemic drug for control;
- (2) No other organic, functional, or attractural disease, defect, or limitation that the Civil Air Surgeon finds —
 - (i) Makes the applicant unable to safely perform the duties or exercise the privileges of the airman certificate that he holds or for which he is applying; or

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SUBPART B CERTIFICATION PROCEDURBS

67.21 APPLICABILITY.

This subpart prescribes the general procedures that apply to the issue of medical certificates for airmen.

67.23 MEDICAL BXAMINATIONS: WHO MAY GIVE.

(a) FIRST CLASS.

Any aviation medical examiner who is specifically designated for the purpose may give the examination for the first class certificate. Any interested person may obtain a list of these aviation medical examiners, in any area, from the FAA Assistant Administrator of the region in which the area is located.

(b) SECOND CLASS AND THIRD CLASS.

Any aviation medical examiner may give the examination for the second or third class certificate. Any interested person may obtain a list of aviation medical examiners, from the FAA Assistant Administrator of the region in which the area is located.

67.25 DELEGATION OF AUTHORITY.

- (a) The authority of the Administrator, under section 602 of the Federal Aviation Act of 1958 (49 U.S.C. 1422), to issue or deny medical certificates is delegated to the Civil Air Surgeon, to the extent necessary to
 - (1) Examine applicants for and holders of medical certificates for compliance with applicable medical standards; and
 - (2) Issue, renew, or deny medical certificates to applicants and holders based upon compliance or noncompliance with applicable medical standards.

Subject to limitations in this chapter, the authority delegated in subparagraphs (1) and (2) of this paragraph is also delegated to aviation medical examiners and to authorized representatives of the Civil Air Surgeon within the FAA.

- (b) The authority of the Administrator, under subsection 314(b) of the Federal Aviation Act of 1958 (49 U.S.C. 1355 (b)), to reconsider the action of a medical examiner is delegated to the Civil Air Surgeon, and his authorized representatives within the FAA. However, any action taken under this paragraph by such a representative is subject to reconsideration by the Civil Air Surgeon.
- (c) The authority of the Administrator, under section 609 of the Federal Aviation Act of 1958 (49 U.S.C. 1429), to re-examine any civil airman, to the extent necessary to determine an airman's qualification to continue to hold an airman medical certificate, is delegated to the Civil Air Surgeon and his authorized representatives within the FAA.

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67.27 DENIAL OF MEDICAL CERTIFICATE. .

- (a) Any person who is defied a medical certificate by an avoition medical examiner of a representative of the Civil Air Surgeon may, within 30 days after the date of the denial, apply in writing to the Civil Air Surgeon, Federal Avoition Apency, Washington 25, D.C., for resonsideration of that denial. He must send with his application a copy of it addressed to the avoition medical examiner, or representative of the Civil Air Surgeon, concerned. If he does not apply for reconsideration during 30 days after the date of denial, he is considered to have withdrawn his application for it mistical certificate.
- (b) The demains a medical certificate by an aviation medical expining or a representative of the Civil Air Surgeon is not a denial by the Administrator under section 602 of the Federal Aviation Act of 1958 (49.U.S.C. 1422). The demail of a medical certificate by the Civil Air Surgeon is considered to be a denial by the Administrator under that section.

67.29 MEDICAL CERTIFICATES BY SENIOR FLIGHT SURGEONS OF ARMED FORCES.

- (a) The FAA has designated senior flight surgeons of the aimed forces on specified military posts, stations, and facilities, as aviation medical examiners.
- (b) An aviation inedical examiner described in paragraph (a) of this section may give physical examinations to applicants for FAA medical certificates who are on active duty or who are, under Department of Defense medical programs, eligible for FAA medical certification as civil airmen. In addition, such an examiner may issue or deny an appropriate FAA medical certificate in accordance with the regulations of this chapter and the policies of the FAA.
- (c) Any interested person may obtain a list of the military policy, stations, and facilities at which a senter flight surgeon has been designated as an aviation medical examiner, from the Surgeon General of the armed force concerned or from the Chief of the Aeromedical Contification Division, AM-300, Federal Aviation Agency, Oklahoma City, Oklahoma.

67.31 MEDICAL RECORDS.

Whenever the Administrator finds that additional medical history is necessary to determine whether an applicant for or the holder of a medical certificate meets the physical standards for it, he requests that person to authorize any clinic, hospital, doctor, or other person to release to the Administrator any available information or records concerning that medical history. If the applicant, or holder, refuses to authorize the release, the Administrator may suspend, modify, or revoke any medical certificate that he holds or may, in the case of an applicant, refuse to issue a medical certificate to him.

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